

PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY **PATENT APPLICATION TRANSMITTAL**

E0889 Attorney Docket No. First Inventor or Application Identifier Philip J. Keller NETWORK INTERFACE AND METHOD OF ...

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b)) Express Mail Label No.

EK347601111US

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APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.						Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC, 20231								
1. [* F (Si Sp (pr - C - C - S - F	Fee Transi ubmit an or pecification referred arra Descriptive Cross Refe Statement Reference Backgroun	mittal Form (e.g., Piginal and a duplicate for [7] angement set forth below title of the Invention erences to Related Al Regarding Fed sponto Microfiche Appended of the Invention	TO/SB/17) r fee processing) Total Pages 17] pplications sored R & D		eleotide and pplicable, a	e Computer I/or Amino Ad I/or	Program cid Sequ) adable C dentical t ifying ide	(Appendix) ence Submission	JC498 U.S				
3.	- Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure Drawing(s) (35 U.S.C. 113) [Total Sheets 2]					7. Assignment Papers (cover sheet & document(s)) 8. 37 C.F.R.§3.73(b) Statement Power of Attorney 9. English Translation Document (if applicable) 10. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 11. Preliminary Amendment								
a. Newly executed (original or copy) b. Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed) 12. Return Receipt Postcard (MPEP (Should be specifically itemized) * Small Entity Statement files.								nt filed in prior applic fill proper and desired fill proper and desired filment(s)	cation, d					
<u>For</u>	16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: Continuation Divisional Continuation-in-part (CIP) of prior application No: For application information: Examiner Examiner Group / Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.													
			1	7. CORRESPONDE	NCE ADI	RESS								
	Customer Number or Bar Code Label Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here)													
Name			Jonathan A. Platt Renner, Otto, Boisselle & Sklar, LLP											
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City			Cleveland	State)H	Zip Code	,	44115					
Country		 	USA Telephone			216-621-1113 Fax 216-621-616								
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	Name (Print/Type)	rint/Type) Jonathan A. Platt			Registration No. (Attorney			41,255	_				
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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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Complete if Known

PTO/SB/17 (2/98)

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FEE TRANSMITTA	ıl	Application Number Filing Date			ber				
Patent fees are subject to annual revision on October 1.	┺╽						ith		
These are the fees effective November 10, 1998.		First Named Inventor		entor		Philip J. K			
Small Entity payments <u>must</u> be supported by a small entity state, otherwise large entity fees must be paid. See Forms PTOISB/0		Examiner Name							
See 37 C.F.R. §§ 1.27 and 1.28.		Group / Art Unit							
TOTAL AMOUNT OF PAYMENT (\$) 820.00		Attorney Docket No.				E0889			
METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)							
	3. A	DDIT	ION	AL FE			100	Z	
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:	Fee	Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Description					escription	Fee Paid	
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FEE CALCULATION	.115	110	215	55			within first month		
1. BASIC FILING FEE	116	380	216				within second mont	h	
	117	870	217				within third month		
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid	ŀ	1,360					within fourth month		
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107 480 207 240 Plant filing fee	120 121		220 221		_	st for oral h			
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114 150 214 75 Provisional filing fee	140	-	240	55			unavoidable		
SUBTOTAL (1) (\$) 690		1,210			Petitio	n to revive -			
2. EXTRA CLAIM FEES	•	1,210	242		Utility i	ssue fee (o			
Fee from Extra Claims below Fee Paid	143		243		Design	issue fee			
Total Claims 25 -20** = 5 x 18 = 90	144	580	244	290	Plant is	ssue fee			
Independent 3 - 3** = 0 x =	122	130	122	130	Petition	ns to the Co	mmissioner		
Multiple Dependent =	123	50	123	50	Petition	ns related to	provisional applicati	ions	
**or number previously paid, if greater; For Reissues, see below	126	240	126	240	Submi	ssion of Info	ormation Disclosure S	Stmt	
Large Entity Small Entity Fee Fee Fee Fee Fee Description	581	40	581	40		ding each pa			
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	146	690	246	345		• •	mber of properties) n after final rejection	40	
102 78 202 39 Independent claims in excess of 3	İ					R 1.129(a))		i l	
104 260 204 130 Multiple dependent claim, if not paid	149	690	249	345	For ea	ch additiona red (37 CFF	al invention to be		
109 78 209 39 ** Reissue independent claims over original patent	Other	fee (sp	ecify)				,		
110 18 210 9 ** Reissue claims in excess of 20 and over original patent		fee (sp							
SUBTOTAL (2) (\$) 90	• Redu	ced by	Basic	: Filing f	Fee Paid	ı sı	UBTOTAL (3)	3) 40	
SUBMITTED BY							Complete (if	applicable)	
Typed or longtha	Jonathan A.						Reg. Number	41,255	
Printed Name Jollatila	<u> //</u>	// 							
Signature School	9				9-00	Deposit Account User ID	18-0988		

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